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CONFIRMATION NO. 19

SERIAL NUMBER 09/584,516	FILING DATE 05/31/2000 RULE	CLASS 370	GROUP ART UNIT 2666	ATTORNEY DOCKET NO. 00,011
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APPLICANTS

David A. Grabelsky, Skokie, IL;

Michael S. Borella, Naperville, IL;
John Poplett, River Forest, IL;Richard J. Dynarski, Freehold, NJ;

✓YES

** CONTINUING DATA *****

This application is a CIP of 09/035,600 03/05/1998 PAT 6,353,614

✓

NONE

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 07/26/2000

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	IL	DRAWING 12	CLAIMS 33	CLAIMS 2
Verified and Acknowledged	Examiner's Signature ✓	Initials			

ADDRESS

McDONNELL BÖHNEN HULBERT & BERGHOFF
 300 South Wacker Drive
 Chicago , IL
 60606

TITLE

Method for address mapping in a network access system and a network access device for use therewith

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
RECEIVED 1054		



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CONFIRMATION NO. 1984

Bib Data Sheet

SERIAL NUMBER 09/584,516	FILING DATE 05/31/2000 RULE	CLASS 709	GROUP ART UNIT 2755	ATTORNEY DOCKET NO. 00,011
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APPLICANTS

David A. Grabelsky, Skokie, IL;
Michael S. Borella, Naperville, IL;
John Poplett, River Forest, IL;
Richard J. Dynarski, Freehold, NJ;

**** CONTINUING DATA *******

THIS APPLICATION IS A CIP OF 09/035,600 03/05/1998

**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE**

GRANTED ** 07/26/2000

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input checked="" type="checkbox"/> Met after Allowance	IL	12	33	2
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

McDONNELL BOEHNEN HULBERT & BERGHOFF
300 South Wacker Drive
Chicago ,IL 60606

TITLE

Method for address mapping in a network access system and a network access device for use therewith

FILING FEE RECEIVED 1054	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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